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APPLICANTS

Steven M. Nielsen, Hastings, MN;

David G. Schueler, Forest Lake, MN;

John W. Frank, Cottage Grove, MN;

** CONTINUING DATA *****

none CB

** FOREIGN APPLICATIONS *****

none CB

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/02/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 3	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>cb</i> Initials <i>CB</i>				

ADDRESS

32692

3M INNOVATIVE PROPERTIES COMPANY

PO BOX 33427

ST. PAUL, MN

55133-3427

TITLE

Flexible article comprising pocket

FILING FEE RECEIVED 960	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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